



**Anne-Emanuelle Birn, Raúl Necochea López, eds.** *Peripheral Nerve: Health and Medicine in Cold War Latin America*. Durham: Duke University Press, 2020. 384 pp. \$29.95, paper, ISBN 978-1-4780-0956-6.

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A specter is haunting the COVID-19 pandemic, the specter of the Cold War. This is particularly true in Latin America. From Mexico to Chile, the pandemic has had a devastating impact on people and the economy. But it has also played out in ways that evoke many of the conflicts that characterized the Cold War. Perhaps most obviously, Chinese and Russian vaccine diplomacy has been prominent in places like Chile (where the Chinese vaccine Sinovac has been widely used) and Argentina (where the Russian vaccine Sputnik—an evocation of the Cold War if there ever was one—has been widely deployed and is now being produced locally). This has raised concerns that the United States may lose more ground to these two rivals—Washington views Chinese investment, particularly in commodities and infrastructure, and Russian President Vladimir Putin’s links with local autocrats, from Nicolás Maduro in Venezuela to Jair Bolsonaro in Brazil, as real threats to its interests in the region. Beyond this, the pandemic has sharpened social tensions between the haves and have-nots and refocused attention on the economic disparities that characterize the region. While some wealthy Latin Americans can fly to the United States to get vaccinated, most are unable to access even basic healthcare as health systems collapse. These tensions and disparities have

led to renewed social protest, most recently in Chile, Peru, and Colombia, and increasing state repression.

Although published before the WHO declared the pandemic in March 2020, this book provides ample material with which to make sense of it as a “vestige of Cold War-era Latin America” (p. 267) but also, more generally, to reconsider the history and legacies of Latin America’s experience of the Cold War. As Gilbert Joseph explains in the foreword, *Peripheral Nerve* is part of an ongoing reassessment of the *Latin American* Cold War. It recenters the region in a scholarship that in the past often ignored it altogether or viewed it as a place where superpower rivalry occasionally intruded. *Peripheral Nerve* focuses an analytical lens on new topics and actors, bringing into fruitful dialogue the new historiography on Latin America’s Cold War and the history of health and medicine, a particularly rich historiographical seam in the last few decades in Latin America. Edited by two of the leading scholars in the field, Anne-Emanuelle Birn and Raúl Necochea López, the volume brings together nine essays on a variety of themes, from medical education to population policy to psychiatry, and countries, from Bolivia to Brazil to Puerto Rico. An introduction, by Birn, and an epi-

logue, co-written by Birn and Necochea López, flank the volume and help to clarify its contributions and, very usefully, outline a research agenda for further work. The volume is divided into three sections which reflect a chronological structure marked by the “early,” “middle,” and “late” Cold War but also serve to underscore how the Cold War in Latin America was subject to different dynamics at different times.

One particularly important contribution of the volume, as Birn emphasizes in the introduction, is the attention given in several chapters to the role of the Soviet Union in developments in the fields of medicine and public health in Cold War Latin America—a departure from most studies of Latin America’s Cold War, which tend to focus on the influence of the United States. In the introduction, Birn usefully outlines the links between the Soviet Union and Latin America before the Cold War. In her chapter, Gabriela Soto Laveaga shows how these links intensified in 1950s Mexico. Building on her earlier work on the development of the barbasco industry and steroid hormone production, Soto Laveaga contrasts the antagonistic relations that developed between Mexico and US pharmaceutical companies in the 1950s to the finely crafted medical diplomacy that the Soviets deployed toward Mexico and Mexicans, including the celebrated muralist Diego Rivera, who received cancer treatment in Moscow. Similarly, Jennifer Lynn Lambe explores how revolutionary Cuba’s complicated relations with the Soviet Union extended into the field of psychiatry and re-signified conflicts within psychiatry between functional and organic perspectives on mental pathology as represented by the opposite Freudian and Pavlovian camps. Though in Cuba, as in the USSR, Sigmund Freud came to be associated with US imperialism, Lambe shows that Cuban psychiatrists resisted the full “Pavlovization” of their field under Soviet influence, retaining elements of functional or Freudian psychiatry in practice.

These examples underscore the agency of Latin American actors in relation to the designs of the Cold War superpowers and their medical establishments, another important theme present in all chapters. Several chapters, moreover, focus on individuals to illustrate the impact of the Cold War at the personal level. Katherine E. Bliss discusses the fascinating life of Lini de Vries, a US communist who joined the international brigades in Spain and later relocated to Mexico where she worked as a nurse and educator among indigenous communities but whose life was deeply influenced by the fact that, as a communist, she was under constant surveillance from the FBI, even in Mexico. Similarly, Gilberto Hochman and Carlos Henrique Assunção Piva discuss the life story of Samuel Barnsley Pessoa, a prominent Brazilian parasitologist and communist. Cold War dynamics impacted directly on his distinguished career. In the 1950s, in a context of rising anticommunism in the United States, the Rockefeller Foundation, which had funded his research on rural pathologies in earlier decades, refused to support his appointment to a university position. Similarly, during the military dictatorship established in 1964, the authorities targeted Pessoa, along with others the University of São Paulo, and subjected him to police interrogation, leading to him to resign from his university position.

The role of the Rockefeller Foundation—a key actor in the long history of US medical diplomacy and, more generally, in the promotion of US geopolitical and economic interests in Latin America—also receives attention in Nicole Pacino’s chapter on medical education in Bolivia. Pacino shows how the Rockefeller Foundation, evidently conscious of the growing anticommunism in the United States, became increasingly reluctant to be seen to be funding communists like Dr. Arturo Urquidí, rector of the University of Cochabamba, through its medical training program. This was in contrast, perhaps surprisingly, to the State Department, which viewed support of the *Movimiento Nacionalista Revolucionario* (Nationalist Revolutionary Movement) government as fundamental

to its broader policy of containing the advance of communism in Latin America. How US Cold War imperatives clashed with national public health objectives is also a theme in Raúl Necochea López's chapter, which looks at population policies in Puerto Rico. The United States viewed Puerto Rico as a laboratory for population control policies, including fertility surveys, that were guided by the belief that uncontrolled population growth would create conditions for the spread of communism. In contrast, Necochea López shows, Puerto Ricans viewed, and indeed experienced, the fertility research undertaken on the island as further evidence of the asymmetric neocolonial relations to which they were subjected by the United States and rejected the findings of the fertility surveys.

The final section of the book explores the late Cold War but also foregrounds a key theme of the book: the importance of international and transnational forces in shaping the history of health and medicine in Latin America. Jadwiga E. Pieper Mooney traces the history of Chile's National Health Service, modeled on the British National Health Service, and stresses the key roles of two doctors: Salvador Allende, a key figure in Chile's Socialist Party who became president in 1970 and was overthrown in the US-backed coup in 1973 led by General Augusto Pinochet, and Benjamin Viel. In the context of 1930s Popular Front politics, Allende promoted the adoption of socialized medicine to address Chile's social injustices and close the gap between rich and poor. Though broadly aligned with Allende's objectives, and clearly building on his earlier effort, in "framing health as a contributor to economic productivity and national development" (p. 196) Viel was able to gain broad support for the establishment of the national health service in the early 1950s. Pieper Mooney stresses how the Cold War, and the competing models of health care that the United States and the Soviet Union promoted, framed projects to establish a health service in Chile. But she also points to the capacity of local actors like Allende and Viel

to negotiate that context and develop institutions such as APROFA (Chilean Association for the Protection of the Family), which despite some limitations, proved successful in addressing key public health problems.

How Latin Americans responded to international forces shaping medicine and public health is also a key theme in the chapter by Marco Ramos, which looks at Argentine psychiatry in the 1970s. Ramos explores how a nationalist psychiatry emerged in Argentina in a context shaped by a rejection of both the antipsychiatry movement and Soviet psychiatry. David Cooper's antipsychiatry movement and his anti-imperialist rhetoric found some support among the "psy" community in Buenos Aires during his sojourn in the early 1970s. But, Ramos shows, Argentine psychiatrists like Antonio Caparrós and Alfredo Moffatt rejected what they viewed as the *hippismo* of Cooper much as they did Soviet psychiatry and what they perceived to be its ingrained anti-semitism. Instead, they embraced a *nationalist* psychiatry which resonated with the Peronist left and which sought to identify a distinctly Argentine form of psychiatry suited to the national psyche. In the final chapter, Cheasty Anderson, meanwhile, looks at Cuban medical diplomacy in revolutionary Nicaragua, shifting focus to a case of south-south exchange. She explores what effects Cuban doctors had on the development of Nicaraguan health care, which in a context of US-backed contra hostilities, proved crucial even if Nicaraguans did not always welcome the Cubans as might be expected. But Anderson also considers what functions the international health brigades served regarding Cuba's own revolutionary project, noting that service was intended to foment revolutionary zeal in the doctors.

In the epilogue, the editors reflect on several of the themes of the book and consider the legacies of Cold War dynamics beyond the 1980s and particularly in the context of the Pink Tide governments of the early 2000s. They also helpfully outline a

series of areas for further research, including the role of international agencies, from the WHO to UNICEF, in the history of health in Latin America, the role of individuals such as doctors trained in the Soviet Union or those supported by US philanthropic organizations, the need to extend research to rural areas and to indigenous populations, as well as to women's movements, and flag the potential benefits from connecting the history of medicine and public health to the history of development projects and economic policies. There is, of course, much still to be done, and Latin America's experience of the COVID-19 pandemic will no doubt provide a new and urgent point of perspective to rethink the past. As *Peripheral Nerve* shows, the history of health and medicine in Latin America is, excuse the pun, in very good health, and clearly has much to tell us about the region's experience of the Cold War and its legacies. At the same time, the volume shows clearly that the agenda to extend our study of the Cold War beyond both superpower rivalries and their localized effects in the region and into new fields such as the politics of scientific expertise or south-south exchanges, and, of course, health and medicine, is essential if we are to make sense of one of the defining processes in Latin America in the twentieth century.[1]

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#### Note

[1]. This book can be usefully paired with two recent studies: Andra Chastain and Timothy Lorek eds, *Itineraries of Expertise: Science, Technology, and the Environment in Latin America* (Pittsburgh: University of Pittsburgh Press, 2020); and Thomas C. Field Jr., Stella Krepp, and Vanni Pettinà, eds., *Latin America and the Global Cold War* (Chapel Hill: University of North Carolina Press, 2020).

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